



## INSTITUTIONAL ETHICS COMMITTEE (IEC)

Seth G. S. Medical College and KEM Hospital, Mumbai.

### Annexure 4

AX 04/SOP 20/V 7

### Checklist-Research Involving Students, Employees or Residents

Principal Investigator (Name, Designation & Affiliation): .....

IEC No. of the Project: .....

Study Title: .....

.....

Participants who are students, employees or residents require special considerations.

Does the employer or supervisor of the research participant need to be aware of the research project?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Is there a letter of support from the employee/administrator?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Have the participants been assured that their status (education, employment, and/or promotion) will not be affected by any decision to participate or not?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Have the risks to participants been minimized?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Have participants been assured that participation is voluntary (no signs of coercion)?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Have participants been assured that confidentiality will be protected or maintained?	<input type="checkbox"/> Yes	<input type="checkbox"/> No

Signature of Principal Investigator: ..... Date: .....

IEC Office use only	
Comments	
Primary Reviewer Signature & Date:	